

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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|  |                              |                              |                              |
|--|------------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18  | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| <input type="checkbox"/> 20a           | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input type="checkbox"/> 21  |

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NAME OF COMMITTEE (In Full)

Vargas for Congress

Full Name (Last, First, Middle Initial)

**A. Fiorello Consulting**

Mailing Address 3914 Barcroft Mews Court

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 03  |   | 16  |   | 2015    |

|              |       |            |
|--------------|-------|------------|
| City         | State | Zip Code   |
| Falls Church | VA    | 22041-1218 |

Amount of Each Disbursement this Period

|      |
|------|
| 3000 |
|------|

Purpose of Disbursement  
Fundraising: Consulting Fee

003

Transaction ID : B-E-3005

Candidate Name

Category/  
Type

|                |           |  |
|----------------|-----------|--|
| Office Sought: | House     | Disbursement For: 2016   |
|                | Senate    |  |
|                | President |  |
|                |           | <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General |
|                |           | <input type="checkbox"/> Other (specify)                                     |

State: District:

Full Name (Last, First, Middle Initial)

**B. Fontainebleau Miami Beach**

Mailing Address 4441 Collins Avenue

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 02  |   | 24  |   | 2015    |

|             |       |            |
|-------------|-------|------------|
| City        | State | Zip Code   |
| Miami Beach | FL    | 33140-3227 |

Amount of Each Disbursement this Period

|        |
|--------|
| 482.12 |
|--------|

Purpose of Disbursement  
Travel: Lodging

002

Transaction ID : B-E-2967

Candidate Name

Category/  
Type

|                |           |  |
|----------------|-----------|--|
| Office Sought: | House     | Disbursement For: 2016   |
|                | Senate    |  |
|                | President |  |
|                |           | <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General |
|                |           | <input type="checkbox"/> Other (specify)                                     |

State: District:

Full Name (Last, First, Middle Initial)

**C. Fontainebleau Miami Beach**

Mailing Address 4441 Collins Avenue

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 03  |   | 01  |   | 2015    |

|             |       |            |
|-------------|-------|------------|
| City        | State | Zip Code   |
| Miami Beach | FL    | 33140-3227 |

Amount of Each Disbursement this Period

|       |
|-------|
| 50.17 |
|-------|

Purpose of Disbursement  
Travel: Food & Bev. for Meeting

002

Transaction ID : B-E-3052

Candidate Name

Category/  
Type

|                |           |  |
|----------------|-----------|--|
| Office Sought: | House     | Disbursement For: 2016   |
|                | Senate    |  |
|                | President |  |
|                |           | <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General |
|                |           | <input type="checkbox"/> Other (specify)                                     |

State: District:

**SUBTOTAL** of Disbursements This Page (optional).....

3532.29

**TOTAL** This Period (last page this line number only).....